Docket	No ·	
Docker	INO	

APPLICATION FOR UNITED STATES PATENT **DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:
My residence, post office address and citizenship are as stated below next to my name; that I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMAGE FORMING APPARATUS								
described and claimed	l in the specifica	ntion:						
b. 🔲		o as Application Serial No and						
amended on (if applicable) I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose to the Office all information known to me to be material to patentability defined in Title 37, Code of Federal Regulations, § 1.56.								
Under Title 35 U.S. Code § 119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed within one year prior to this application are hereby claimed:								
			filed on December 24, filed on December 24					
the United States of	America either	(a) more than one year	's certificate on this invent prior to this application es provisional application	tion were filed in countries foreign to or (b) before the filing date of the s):				
this application and to	transact all bus James A. (Kirk M. H Edward P.	siness in the Patent and Ti Oliff, Reg. No. 27,075; W Judson, Reg. No. 27,562; Walker, Reg. No. 31,450	ecord with full power of surademark Office: Villiam P. Berridge, Reg. N Thomas J. Pardini, Reg. N Robert A. Miller, Reg. N Caroline D. Dennison, Rej	o. 30,411, o. 32,771,				
ALL CORRESPONI	DENCE IN C	ONNECTION WITH T	·	HOULD BE SENT TO OLIFF &				
herein of my own kn further that these state by fine or imprisonn	owledge are tracements were manents were manents or both, u	ue and that all statement ade with the knowledge t	s made on information ar hat willful false statement itle 18 of the United Sta	claration, and that all statements made and belief are believed to be true; and as and the like so made are punishable tes Code and that such willful false				
Typewritten Full Name of Sole or First inventor:		Yasushi		ОНКІ				
**Inventor's Signature:		Given Name Middle Initial		Family Name Okki				
**Date of Signature:		November Month	25, Day	2003 Year				
Residence:	Ebina-shi City	Kanagawa Japan						
Citizenship:	City	State of Province Country Japan						
Post Office Address: (Insert complete mailing address, including country)		c/o Fuji Xerox Co., Ltd., 2274, Hongo, Ebina-shi, Kanagawa, Japan						

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "×" HERE ☒

^{*}This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

^{**}Note to Inventor: Please sign name exactly as it appears above and insert the actual date of signing.

PAGE 2 OF U.S.A. DECLARATION FORM

Typewritten Full Name of Second Joint inventor		Yoshio		•		KANESAWA	
of Second John Inventor.		Given Name Middle Initial				Family Name	
**Inventor's Signature	»:	Unsh	•			Kanesawa.	
**Date of Signature:			vember		25,	2003	
Date of Signature.		INC	Month		Day	Year	
Residence:	Nakai-macl	hi	Ka	anagawa		Japan	
	City	State of Province		nce	Country		
Citizenship:		Japan					
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(Insert Complete mailing address, including country)	•	Ashigarakami-gun, Kanagawa, Japan					
Typewritten Full Name	e					· ·	
of Third Joint inventor		Yutaka				NOGAMI	
•	,	Given Name		Middle	Initial	Family Name	
**Inventor's Signature) :	Yutak	ca			Nogami	
**Date of Signature:		/ No	vember		25,	2003	
			Month		Day	Year	
Residence:	Nakai-mac	hi		anagawa		Japan	
	City	r	Sta	ite of Provir	nce	Country	
Citizenship:		Japan					
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(Insert Complete mailing address, including country)		Ashigarak	ami-gun, K	anagawa,	Japan		
Typewritten Full Namo of Fourth Joint invento		Yoshisad Given Name		Middle	Initial	NAKAMURA Family Name	
**Inventor's Signature	••	Given Name	"his acla	, white	шиат	1 / /	
	,	- you	MAUCIA			Natamura	
**Date of Signature:		// Nov	rember Month		25 . Dav	2003 Year	
Residence:	Fujinomiy	o-chi		nizuoka	Day	Japan	
Residence.	City	а виг		ite of Provin	nce	Country	
Citizenship:		Japan	-				
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(Insert Complete mailing address, including country)		Fujinomiya-shi,Shizuoka, Japan					
address, increasing continy)		1 djilloilli	ya shi,bili	zuoka, oc	аран		
Typewritten Full Name	9						
of Fifth Joint inventor:		Tadakazu	1			EDURE	
	•	Given Name	e , /)	Middle	Initial	Family Name	
**Inventor's Signature	e:	(a)	dakarin			Gare	
**Date of Signature:			vember		25,	2003	
v			Month		Day	Year	
Residence:	Ebina-shi			anagawa		Japan	
	City	_	Sta	ite of Provin	nce	Country	
Citizenship:		Japan					
Post Office Address:		c/o Fuji X	Kerox Co., L	رtd., 2274,	Hongo,		
(Insert Complete mailing address, including country)	Ebina-shi, Kanagawa Japan						

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.

^{**}Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.